

TORT CLAIM ACT NOTICE OF CLAIM

TO: Mayor Harry Shortway
Vernon Township
21 Church Street
Vernon, NJ 07462

Charles G. Voelker, Administrator
Vernon Township
21 Church Street
Vernon, NJ 07462

Donelle Bright DeCouto, CFO
Vernon Township
21 Church Street
Vernon, NJ 07462

1. Claimant:

Lauren Kirkman
[REDACTED]
[REDACTED]

2. If notices and correspondence in connection with this claim are to be sent to a person other than Claimant, complete #2.

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Attorneys for Claimant

3. The occurrence or accident which gave rise to this claim:

- a. **Date:** On or about August 26, 2019 and continuing to present.
- b. **Describe the location or place of the accident or occurrence:**
- c. **Describe how the accident or occurrence happened. If a diagram will assist your explanation, please attach hereto.** The persons named herein have created a hostile work environment against the claimant. The hostility arises from the fact that Mayor Shortway is at odds with the Council. In the Shortway camp is the Administrator Voelker and CFO DeCouto. Recently, the Council voted to end the Township's relationship with CFO DeCouto but Shortway continued her employment. Even though

the CFO was not reappointed, Mayor Shortway spent more than \$5,000 of taxpayer money for courses unrelated to her job responsibilities.

Claimant is the Municipal Clerk and carries out the responsibilities of elected officials and because Shortway is at odds with the Council and is supporting a candidate for Mayor who is running against a present member of the Council, Shortway has enlisted the services of the Administrator Voelker in creating hostility towards the Claimant.

Each of the parties named herein has contributed to and encouraged the hostile work environment which has caused for the Claimant a significant health issue. Recently, the persons named herein conspired to create an investigation into false claims against the Claimant which claims have been unsubstantiated. Each of the persons named herein falsely claimed that the Claimant was guilty of harassing the Chief Financial Officer. In addition, each of the persons named herein have encouraged persons working in the Municipal Clerk's Office to create a hostile work environment by spying on the Claimant.

d. **State the name and address of the state agency(ies) that you claim caused your damage:** Mayor Harry Shortway, Vernon Township, 21 Church Street, Vernon, NJ 07462; Charles G. Voelker, Administrator, Vernon Township, 21 Church Street

Vernon, NJ 07462; and Donelle Bright DeCouto, CFO, Vernon Township, 21 Church Street, Vernon, NJ 07462.

e. **State the names of state employees whom you claim were at fault, including any information that will assist in identifying them:** See (d) above.

f. **State the negligence or wrongful acts of the state agency and state employees which caused your damages:** See answer (c) above.

g. **State the name and address of all witnesses to the accident or occurrence:**

h. **State the names of all State Police officers and Police Departments who investigated the accident or occurrence:**

4. Claim for damages (check all that apply):

a. **(X) Personal Injury () Property Damage (X) Other:** The Claimant's health has been compromised by the hostile work environment.

b. **If you claim personal injury:**

(i) Describe your injuries resulting from this accident or occurrence:

(ii) Do you claim permanent disability resulting from this injury? () Yes () No

(iii) If the answer to (ii) above is yes, describe the injuries believed to be permanent:

(iv) Set forth any and all other losses or damages claimed by you:

c. If you claim property damage:

- (i) Describe the property damaged:
- (ii) The present location and time when the property may be inspected:
- (iii) Date property acquired:
- (iv) Cost of property:
- (v) Value of property at the time of accident or occurrence:
- (vi) Description of damage:
- (vii) Has the damage been repaired?
- (viii) If the answer to (vii) above is yes, provide the name, address of who repaired the damage, date of repair and cost of same:
- (ix) Attach each estimate of repair costs to this form.
- (x) Set forth in detail the loss claimed by you for your property damage:

d. Set forth in detail all other items of loss or damages claimed by you and the method by which you compute the same:

5. Set forth the amount of your claim: \$350,000.00.
6. Have you made a claim against anyone else for any of the losses or expenses claimed in this notice?
7. Are any of the losses or expenses claimed herein covered by any policy of insurance? If so, set forth the detail of such agreement:
8. Have you received or agreed to receive any money from anyone for the damages claimed herein? If so, set forth the detail of such agreement:
9. The following items must be submitted with this notice:
 - a. Copies of all appraisals and estimates of property damage claimed by you.
 - b. Copies of all written reports of all expert witnesses and treating physicians.
 - c. A letter from your employer verifying your lost wages. If self-employed, a statement showing the calculation of your claimed lost income.

I hereby certify that the foregoing statements made by me are true, that the attached statements, bills, reports and documents are the only ones known to me to be in existence at this time.

I am aware that if any statement made herein is willfully false or fraudulent, that I am subject to punishment provided by law.

LAW OFFICES OF GEORGE T. DAGGETT
Attorneys for Claimant

By:

GEORGE T. DAGGETT

Dated: 11/6/19